United States of American District of Massachusells Basion Perision 1805 MAR 15 P 1:21 Case No. As Related of Courts Reports Relating To Joseph Marion Head Junior TREES, MYSSumber 17549-056, Respondent

Motion For a Hearing Pursuant to The Provisions of 18 U.S. C. 4245 (h) and 28 U.S.C. 2241.

Comes Now Joseph Marion Head funion Reg. No. 17549+056 who himself prose hearing appraise sursuant to the apospic laws and futher fursuant to the Constitution and Husian Rights, as relates and applies hereto.

And of His State and Federal Court Cases Eta. Relating Thereto and Hereto

Movant dose not have a copy of the records, its relating to the apolisais and thus moves the court to order the United States to fully relate the aforsaid to the Court and Respondent in a timely refly hereto, to enclude all processes etc. Trelating to same and all related and asserted therein and aske for and demanded.

Appoint Coursels Hereto, 18 U.S.C. 30006 A. Jaseph Marion Hear Junior 3-14-05

Restricted	Spending	Limit:	\$0.00
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Restricted Expended Amount: \$0.00

Restricted Remaining Spending Limit: \$0.00

Restriction Start Date: N/A

Restriction End Date: N/A

Item	Restrictions
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List Name List Type Start Date End Date Userid Active

Comments

Comments:

United States District Court
For The District of Massachusetts
Boston Massachusetts FILEDVISION
Seph Marion Hear Junior Barrolles Rela

State of North Carolina DISTRICT OF MASS

and David L. Winn

Motion For Appointment of Counsel

Now Comes Joseph Marion Hard funior 17549 056 movant herein, who kimself pro se respectfully moves this court for apprintment of Counsel in the above Cause, 184.5 C, 30066 A and sub sec.

Futher order the aforsaid to file a respond etc timely or fudgment at Default enter by this court against them.

See all records etc of the First lie, U. App. That relates to movant herein,

Speedy Reply Requested Eta. Noseph Marion Head Junior 3-25-05 Outstanding Negotiable Instruments:

\$0.00

\$0.00

Administrative Hold Balance:

Available Balance:

\$408.02

National 6 Months Deposits: \$848.80

\$419.18

National 6 Months Avg Daily Balance:

\$23.25 \$552.13

Local Max. Balance - Prev. 30 Days: Average Balance - Prev. 30 Days: \$109.69

National 6 Months Withdrawals:

Commissary History

Purchases

Validation Period Purchases: \$78.95

YTD Purchases: \$292.17

Last Sales Date: 2/28/2005 11:43:41 AM

SPO Information

SPO's this Month: 0

SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No

Weekly Revalidation: No

Spending Limit: \$290.00

Expended Spending Limit: \$56.75

Remaining Spending Limit: \$233.25

Commissary Restrictions

Spending Limit Restrictions

United It tes first Cincuit Joseph Marion Hear Sunion Plaintiff Appellant As Related of This Courts Records And of the District Court Records And all other court Records See Records of Clerk of Each Court For the Case File Numbers of Each Court Motion For Leave To Proceed In Forma Paupen Or For To Pay Cost of Liling Fie's In Payments As To Each Case As Was Done In Some of The Cases Alrea The courts should have done this! prior, instead of dismissing etc. a related of each courts court / sucous relating to the Plaintiff Appellant hereof. That was to aford due process and equal protection of law constitution and Human Right To not do so from was a violation of said laws, rights, etc. . 18 U.S.C. 120, amendment 1, 5, 14, etc. as applies hereto. Signed, Joseph Marion Head Junior 17549-05:

Inmate Inquiry



Inmate Reg#:

17549056

Current Institution:

Devens FMC

Inmate Name:

HEAD, JOSEPH

Housing Unit:

N SOMP

Report Date:

03/01/2005

Living Quarters:

N05-527L

Report Time:

3:38:59 PM

General Information

Account Balances

Commissary History

Commissary Restrictions

Comments

General Information

Administrative Hold Indicator:

No

No Power of Attorney: N

Never Waive NSF Fee: No

Max Allowed Deduction %: 100

PIN: 5438

FRP Participation Status:

ExemptTmp

Arrived From:

Transferred To:

Account Creation Date:

2/15/2002

Local Account Activation Date:

7/1/1991

Sort Codes:

Last Account Update:

3/1/2005 1:39:56 PM

Account Status:

Active \$0.00

ITS Balance:

FRP Plan Information

FRP Plan Type

Expected Amount Expected Rate

Account Balances

Account Balance:

\$429.62

Pre-Release Balance:

\$0.00

Debt Encumbrance:

\$21.60

SPO Encumbrance:

\$0.00

Other Encumbrances:

\$0.00

United States Court of Appeals For the First Circuit

No. 05-1050 DC No. 04-cv-40103

JOSEPH MARION HEAD, JR. Petitioner - Appellant

v.

UNITED STATES; DAVID L. WINN; STATE OF NORTH CAROLINA Respondents - Appellees

FINAL ORDER OF DEFAULT AND INTENT TO DISMISS Entered: February 25, 2005

On February 2, 2005, this court entered an order directing the appellant to either pay the docketing fees of \$255.00 or to file a compliant request for in forma pauperis status before the district court. The appellant was directed to respond to this court regarding the outstanding fee issue on or before February 16, 2005.

To date, no response has been received. The appellant is presently in default. The appellant is directed to either pay the docketing fees or to file a compliant request for in forma pauperis status in the above noted case number before the district court on or before March 11, 2005, and to inform this court in writing. A compliant request before the district court consists of a motion to proceed on appeal in forma pauperis, a fully completed form 4 and an attached inmate account statement. A copy of Form 4 is included to the appellant.

Failure to take action regarding the outstanding fee issue on or before March 11, 2005, may result in this appeal being dismissed for lack of prosecution pursuant to Local Rule 3.

By the Court:

Richard Cushing Donovan, Clerk

By: MARGARET CARTER

Chief Deputy Clerk

[cc: Messrs. Head, Cooper, Sullivan]
The clossaid was timely sent to the Court. As to why sar
Not received, I do not know.

North marion Head Lunion 17549-056 - 3-1-05

- 2. After the initial partial filing fee is paid in full, pursuant to 28 U.S.C. §1915(b)(2) and the consent form executed by appellant, appellant's custodian is directed to calculate and remit each succeeding month on a continuing basis 20% of the preceding month's income credited to appellant's account, but only when the amount in the account exceeds \$10, until the full \$255 filing fee is paid. Each payment shall reference the docket number of this appeal and the district court docket number and be paid to the district court.
- 3. Appellant's custodian shall notify this court and the Clerk of the United States District Court if the appellant is transferred to another institution or released.
- 4. A copy of this order shall be sent to appellant's custodian and to the Clerk of the United Stated District Court for the District of Massachusetts. A copy of appellant's authorization shall be sent to the custodian.

For the court, by direction,
Richard Cushing Donovan, Clerk

By:_	ULIE GRE	GG
	Operations	Manager

[Certified copy to William Ruane, Acting Clerk of the USDC of MA, and John Collantis, Unit Manager, FMC Devens, cc: Messrs. Head, Cooper, Sullivan]

Affidavit to Accompany Motion for Leave to Appeal in Forma Pauperis

District Court No. 04-CV-40103Appeal No. 0.5-10.50

v.

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: pseph Marion Hoso funior

My issues on appeal are:

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source		Average monthly the past 12 month	y amount during	Amount expected	d next month
Alan T.	Tutional In	_	Uwork	ed De	voces
DIWW	Employment Joh	You \$ <u>M/A</u>	Spouse SN/A	You \$ <u>N/A</u>	Spouse s <u>N/A</u>
	Self-employment	\$	s <u>N/A</u>	s	s N/A
	Income from real property (such as rental income)	s	s_ <i>N/A</i> _	s	s_N/A
.**	Interest and dividends	s_0_	s <u>N/A</u>	s_O	sN/A

For the First Circuit

This is a property of Amori

No. 05-1048 DC No. 04-cv-40089

JOSEPH MARION HEAD, JR. Plaintiff - Appellant

v.

UNITED STATES; DAVID L. WINN, Warden, Federal Medical Center, Devens; STATE OF NORTH CAROLINA Defendants - Appellees

ORDER OF COURT
Entered: February 4, 2005

The appellant listed above is a prisoner seeking to appeal in forma pauperis and has applied to proceed without prepayment of the \$105 filing fee under the Prison Litigation Reform Act (PLRA), 28 U.S.C. § 1915(a)(2). Appellant has completed and filed a consent form permitting appropriate prison officials to calculate and collect in installments the \$255 filing fee from appellant's prison trust account in accordance with the terms of 28 U.S.C. §1915(b)(1) and (2).

- 1. Pursuant to the consent form signed by the appellant, the custodian of this appellant's inmate trust account is directed to calculate, collect and forward to the Clerk of the United States District Court for the District of Massachusetts, as payment for the initial partial filing fee under 28 U.S.C. §1915(b)(1), 20% of the greater of:
 - (a) the average monthly deposits to the inmate trust account; or
- (b) the average monthly balance in the inmate trust account, for the 6 months immediately preceding the filing of the notice of appeal on November 18, 2004. That sum should be deducted from appellant's prison account until the initial partial filing fee is paid.

Income source	Average monthly the past 12 month	——————————————————————————————————————	Amount expected	next month
Gifts From Brother	You \$ <u>N/A</u> -	Spouse \$ N/A	You O	Spouse \$_N/A
Alimony	s_ <i>O</i>	s_N/A	s	s_N/A
Child support	s	s_N/A_	s	s N/A
Retirement (such as social security, pensions, annuities	s <u> </u>	s N/A	s_ <u>Ø</u>	s N/A
insurance See Vi A	Records		V. A. Record	
Disability (such as social security, insurance payment	s N/A ts)	s N/A	s_ <i>N/A</i> *	s_ <i>N/A</i>
Unemployment payments	s	s_ <i>N/A</i> _	s_ <i>O</i>	s N/A
Public-assistance (such as welfare)	\$ <u> </u>	s N/A	s O	s_N/A
Other (specify): V. A,	s <u>N/A</u>	s N/A	s V.B.	s N/A
Total Monthly income:	and the second s	s N/A	s_ <i>N/A</i>	s <u>NA</u>
See prison t	HUSI L	und Rec	oids	
2. List your employment his other deductions)	story, most recent ei	mployer first. (Gros	ss monthly pay is bo	efore taxes or
Employer A	ddress	Dates of Empl	oyment Gross n	onthly pay
N/A J HOV	Boenj	Cocked 1	4 Over	30 year
	· · · · · · · · · · · · · · · · · · ·		-11	
3. List your spouses's empl taxes or other deductions)	oyment history, mos	st recent employer fi	irst. (Gross month	ly pay is before
Employer A	ddress	Dates of Empl	oyment Gross n	onthly pay
N/A Dixono	uddon ()	ver 31)	year)	1
NIA		·		

Case 1:05-mc-10281-RGS Document 14 Filed 03/15/2005 Page 12 of 19 unice states First Circuit For The No, 05-1048-DC No, 04-CV-40989 Joseph Marion Head Junior Plaintiff - Appellant VS United States, Revis L. Winn Warden, Federal Medical Center, Devens, State of North Carolina Defendant, - Appellees Order of Court Entered February 4, 2005 Motion of Appointment of Counsel To Represent The Eppeal on The Above Entitled Course. Plaintiff-appellant aforsaid, who himsely pro se respectfully mores the downt for appointment of lowered for the since afor Said, 18 U.S. E. 3600664 and Sur Sec. 5 til afeller are sa may be appel hereto. Respectfully trusented on his the 1 th, dis of Jeb. 20.5 -0.5% Marin Hay min Rig. Re. N-2 Cell 219, F. M. Med. Center Devens, Fast office Book 877 Har--11 resaskusette, 01432 Date This Boston Marced, Feb. J.th. 2005

NONE Relationship Age

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FOR THE FIRST CIRCUIT

No. 05-1048

JOSEPH MARION HEAD, JR.

Plaintiff - Appellant

v.

UNITED STATES; DAVID L. WINN, Warden, Federal Medical Center, Devens; STATE OF NORTH CAROLINA

Defendants - Appellees

ORDER OF COURT

Entered: February 10, 2005

Appellant's motion for appointment of counsel dated February 7, 2005 is moot, given the court's February 7, 2005 order provisionally denying appointment of counsel in appeal no. 05-1048.

By the Court: Richard Cushing Donovan, Clerk

MARGARET CARTER

Chief Deputy Clerk

CC: Michael J. Sullivan, USA Roy Cooper, AAG Joseph Marion Head,

8. Estimate the average monthly expenses of you and your fan	uly. Show separately weekly, quarterly, sen	the amounts paid by niannually, c=
annually to show the month	,	0 /
All Cost Relatinglo Cuson	3665	Spouse
Rent or home mortgage payment (include for rented for mobile home)	\$	s_N/A
Are any real estate taxes included? \(\square \) Yes \(\square \) No \(\lambda \)	14	
Is property insurance included? □ Yes □ No / V/	// !	,
Utilities (electricity, heating fuel, water, sewer, and Telephone)	s	s N/A
Home maintenance (repairs and upkeep)	\$_ <i>O</i>	s N/A
Food	\$	s N/A
Clothing	\$ 0	s_N/A
Laundry and dry-cleaning	s 1.05	\$ N/A
Medical and dental expenses	\$	s N/A
Transportation (not including motor vehicle payments)	\$	s_ <i>N/A</i>
Recreation, entertainment, newspapers, magazines, etc.	\$	s_ <i>N/A</i>
Insurance (not deducted from wages or included in Mortgage payments)	\$	\$ NA
Homeowner's or renter's	\$	s N/A
♣ Life	\$ <u>.0</u>	s N/A
Health	s	s N/A
Motor Vehicle	\$	s N/A
Other: V = H ,	s 1827	s N/A
Taxes (not deducted from wages or included in Mortgage payments)(specify):	\$	s N/A
Installment payments bee Court Records	s N/A	s N/A
Motor Vehicle	\$_ <i>D</i>	s N/A
Credit card (name):	s <u> </u>	s_ <i>N/A</i>
Department store (name): Nonl	s	s N/A
Other: Now	. /) *	* N/D

- 2. After the initial partial filing fee is paid in full, present to 29 U S C S1915/b)/(2) and the consent form an entity appellant, appellant's custocard is directed to calculate and remit each succeeding month on a continuing basis 20% of the preceding month's income credited to appellant's account, but only when the amount in the account exceeds \$10, until the full \$255 filing fee is paid. Each payment shall reference the docket number of this appeal and the district court docket number and be paid to the district court.
- 3. Appellant's custodian shall notify this court and the Clerk of the United States District Court if the appellant is transferred to another institution or released.
- 4. A copy of this order shall be sent to appellant's custodian and to the Clerk of the United Stated District Court for the District of Massachusetts. A copy of appellant's authorization shall be sent to the custodian.

For the court, by direction,
Richard Cushing Donovan, Cler

By: Operations Manager

[Certified copy to William Ruane, Acting Clerk of the USDC of MA, and John D. Colautti, Unit Manager, FMC Devens, cc: Messrs. Head, Sullivan]

Case 1:05-mc-10281-RGS Document 14	Filed 03/15/2005	Page 17 of 19
Alimony, maintenance, and support paid to others	s_ <i>O</i>	s_ <i>N/A</i>
Regular mounted to take to business, profession,	<u>ن ب</u>	\$ 141.7
or farm (attach detailed statement)	Ð	
Other (specify):	\$	s N/A
Juson and Court tal monthly expenses:	s N/A	s 11/A
9. Do you expect any major changes to your monthly incommuning the next 12 months? From No If yes, describe on Vi A. Banefits and See	an attached sheet	
10. Have you paid — or will you be paying — an attorney case, including the completion of this form? □ Yes □ No	any money for service	Claims es in connection with this
If yes, how much? \$		
If yes, state the attorney's name, address, and telephone nur	nher	
	ilber.	-
		-
11. Have you paid — or will you be paying — anyone other typist) any money for services in connection with this case, ☐ Yes ♥ No	r than an attorney (su including the comple	uch as a paralegal or a tion of this form?
If yes, how much? \$		
If yes, state the person's name, address, and telephone num	ber:	B
		•
e ge		
		4. 7
12.Provide any other information that will help explain wh	y you cannot nav the	docket fees for your
12.Provide any other information that will help explain wh appeal.		
have been incustody for	1 over 3	O years a
have been incustody for	1 over 3	O years a
have been incustody for believe am and wa	1 ove 13 5 Kidna	O gears a ped by fu
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United States Count of Appeals

For the First Circuit

No. 05-1049 DC No. 04-cv-40090

JOSEPH MARION HEAD, JR., Plaintiff - Appellant,

v.

DAVID L. WINN, Warden, Federal Medical Center, Devens; UNKNOWN PARTIES, named as Each Governmental Employee Liable Relating Hereto,
Defendants - Appellees.

ORDER OF COURT
Entered: February 17, 2005

The appellant listed above is a prisoner seeking to appeal in forma pauperis and has applied to proceed without prepayment of the \$255 filing fee under the Prison Litigation Reform Act (PLRA), 28 U.S.C. § 1915(a)(2). Appellant has completed and filed a consent form permitting appropriate prison officials to calculate and collect in installments the \$255 filing fee from appellant's prison trust account in accordance with the terms of 28 U.S.C. §1915(b)(1) and (2).

- 1. Pursuant to the consent form signed by the appellant, the custodian of this appellant's inmate trust account is directed to calculate, collect and forward to the Clerk of the United States District Court for the District of Massachusetts, as payment for the initial partial filing fee under 28 U.S.C. §1915(b)(1), 20% of the greater of:
 - (a) the average monthly deposits to the inmate trust account; or
- (b) the average monthly balance in the inmate trust account, for the 6 months immediately preceding the filing of the notice of appeal on November 18, 2004. That sum should be deducted from appellant's prison account until the initial partial filing fee is paid.

13. State the address of your Nove - Appo	legal residence. Ent Me Counsel	
Your daytime phone numbe	Your years of schooling: G, E, D, in U, S, Army Ove	
Your age: <u>58</u>	Your years of schooling: G, E, D, in U.S. Army Ove	1
	30 years ago,	

<